

**Effective October 1, 2001**

**CLAIMS AS FILED - PART I**

(Column 1)

(Column 2)

|                                  |               |                          |
|----------------------------------|---------------|--------------------------|
| TOTAL CLAIMS                     |               |                          |
| FOR                              | NUMBER FILED  | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 29 minus 20 = | * 9                      |
| INDEPENDENT CLAIMS               | 4 minus 3 =   | * 1                      |
| MULTIPLE DEPENDENT CLAIM PRESENT |               | <input type="checkbox"/> |

## CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

| AMENDMENT A                                    | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
|--|----------------------------------|-------|------------------------------------|--------------------------|
|  |                                  |       |                                    |                          |
| Total  | *                                | Minus | **                                 | =                        |
| Independent                                    | *                                | Minus | ***                                | =                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |       |                                    | <input type="checkbox"/> |

**TYPE**

OR

## SMALL ENTITY

| RATE      | FEE    |    | RATE      | FEE    |
|-----------|--------|----|-----------|--------|
| BASIC FEE | 370.00 | OR | BASIC FEE | 740.00 |
| X\$ 9=    |        | OR | X\$18=    | 162    |
| X42=      |        | OR | X84=      | 84     |
| +140=     |        | OR | +280=     |        |
| TOTAL     |        | OR | TOTAL     | 986    |

OR

## SMALL ENTITY

| RATE                | ADDITIONAL FEE |    | RATE                | ADDITIONAL FEE |
|---------------------|----------------|----|---------------------|----------------|
| X\$ 9=              |                | OR | X\$18=              |                |
| X42=                |                | OR | X84=                |                |
| +140=               |                | OR | +280=               |                |
| TOTAL<br>ADDIT. FEE |                | OR | TOTAL<br>ADDIT. FEE |                |

TOTAL  
ADDIT. FEE

|            |  |
|------------|--|
| TOTAL      |  |
| ADDIT. FEE |  |

|                    |   | (Column 1)                                |       | (Column 2)                                  | (Column 3)       |
|--------------------|---|---|-------|---|------------------|
| <b>AMENDMENT B</b> |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|                    | Total   | *   | Minus | **  | =                |
|                    | Independent   | *   | Minus | ***   | =                |
|                    | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |       |   |                  |

| RATE                | ADDITIONAL FEE |    | RATE                | ADDITIONAL FEE |
|---------------------|----------------|----|---------------------|----------------|
| X\$ 9=              |                | OR | X\$18=              |                |
| X42=                |                | OR | X84=                |                |
| +140=               |                | OR | +280=               |                |
| TOTAL<br>ADDIT. FEE |                | OR | TOTAL<br>ADDIT. FEE |                |

TOTAL  
ADDIT. FEETOTAL  
ADDIT. FEE

|                    |   | (Column 1)                                |       | (Column 2)                                  | (Column 3)       |
|--------------------|---|---|-------|---|------------------|
| <b>AMENDMENT C</b> |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|                    | Total   | *   | Minus | **  | =                |
|                    | Independent   | *   | Minus | ***   | =                |
|                    | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |       |   |                  |

| RATE                | ADDITIONAL FEE |    | RATE                | ADDITIONAL FEE |
|---------------------|----------------|----|---------------------|----------------|
| X\$ 9=              |                | OR | X\$18=              |                |
| X42=                |                | OR | X84=                |                |
| +140=               |                | OR | +280=               |                |
| TOTAL<br>ADDIT. FEE |                | OR | TOTAL<br>ADDIT. FEE |                |

TOTAL  
ADDIT. FEETOTAL  
ADDIT FEE

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.